

NEW SPECIFICATION

DIAGRAM [Cf. original, and key below]

A - Tasks

B - Training and advice for therapy providers

C - Development of necessary aids

D - Control and supervision of the therapy providers

E - Recommendation of specific types of therapy

F - Central computer

G - Therapy providers

H - Out-patient clinic

I - Day clinic

J - Psychology or Psychotherapy office

K - Physician's office

L - Psychiatrist

M - Psychotherapy

N - Dance or Riding therapy

...Field circuit (Feldenkreis)

Process and device for the coordination of several types of therapy and therapy providers participating in the treatment of patients

The invention proceeds from a process and a device for the coordination of several types of therapy and therapy providers participating in a treatment of a patient according to the generic term of claim 1 and of claim 6.

For the treatment of patients with anxiety or panic disturbances, with addictive eating behavior, stress or addiction problems, there are known various methods of behavior therapy or of psychoanalysis. Depending on the method of treatment, the patient is treated in a clinic or in a practice. For the treatment there is selected mostly a certain type of therapy and this is used on the patient. It proves disadvantageous with these known processes that the patient does not receive any comprehensive treatment. Since only one type of therapy is applied and the patient is mostly treated by only one therapy provider, the patient frequently receives a one-sided treatment that acts against his illness to a limited extent only. There is the risk of a wrong treatment by reason of a false diagnosis, and the danger of a relapse after termination of the treatment is very high.

In the face of this, the process of the invention with the characterizing features of claim 1, and the device of the invention with the characterizing features of claim 6, have the advantage that several types of therapy and several therapy providers can be linked with one another. With the therapy providers it can be, for example, a matter of a practice, a clinic, a sports location or a further educational arrangement. First of all the data characteristic of the patient's illness are determined by one or several therapy providers. Diagnosis and therapy can already be interconnected with each other.

First of all the patient goes through his behavior disturbed by illness with a therapist. This plane of thoughts and the behavior resulting therefrom is designated by the term cognition. With methods of behavior therapy a new behavior is worked out, for example, with self-control exercises. Here there take place habituation processes which are needed

by well-directed therapeutic intervention until there is complete reduction of the addictive or disturbed behavior. Via instructions and discussion of what is experienced there comes about a cognitive restructuring. There, the patient again experiences himself as action-controlling. The behavior therapy methods are used disturbance—specifically. These comprise, for example problem analysis, cognitive processes, relaxation, and the overcoming of stress.

In a further stage of treatment the matters dealt with are the body feeling (Körpergefühl), self-awareness, and own-value regulation of the patient. This plane of body awareness and body experience is designated with the term motoricity (Motorik). For the therapy there are used body-oriented processes such as, for example, (Feldenkrais (sic) Feldenkrais : field-circuit ?), riding therapy or motor-therapy.

In riding therapy, the encountering and dealing with a typical fear-triggering (angstauslösenden) animal, the patient's experience, thinking and acting can be controlled. The horses take over the criticism of faulty behavior otherwise given by the adults and often felt as humiliating. The correction is accepted by the animals without frustration ((?) - frustationsfrei), The animal perceives no faults, cannot yield or make compromises, and it immediately reacts to the corresponding treatment. The patient learns in this manner the direct connection between cause and effect, so that spontaneously and without inner protest he can * develop the needed self-control and observe rules. Other types of therapy that address the patient's motoricity are likewise possible.

In a third stage of treatment the patients talk about their problems and their dealing with them. The plane of feelings and the behavior resulting from it are designated with the term emotion. For the therapy there are applied the methods of psychoanalysis. There take place, there, for example under therapeutic guidance, group-dynamic processes which give the individual an insight into his own personality, since not infrequently mental (seelische) disturbances are present, or even psychic disturbances as well, such as, for

example, metabolism disturbances with a psychogenic constituent. A motivation training stabilizes the sought results over a relatively long period of time.

The sequence of these three treatment stages can be chosen in each case according to the indication.

The data pertaining to the different treatment stages, of the patient, of the therapy provider and of the therapy type, are input into a computer and stored. Over an electronic data network these data can be transmitted to all therapy providers participating in the therapy. In this manner the therapy providers can access the data at any arbitrary point of time and plan the therapy correspondingly. The therapy types can in this way be interconnected with one another, so that the patient undergoes a comprehensive (umfasende) treatment. This is observed not by one therapy provider only, but by several therapy providers interconnected with one another. The danger of a wrong diagnosis and of a wrong treatment associated with it is thereby minimized. Through the comprehensive treatment which relates not only to one level but to several levels, namely emotion, cognition and motoricity. The patient receives the possibility of solving the problems caused by the sickness not only temporarily, but over a relatively long range. The danger of relapses is thereby reduced.

With the process of the invention and the device according to the invention, for example, patients with material or non-material dependency ailments can be treated. Among these are anxiety or panic disturbances, eating problems, for example adiposities, stress, or addiction problems. Also substitution patients and persons whose driver's license has been confiscated on grounds of driving under the influence of liquor or other offenses can subject themselves to such a therapy.

In addition to the above-mentioned types of treatment, further methods can be used according to indication. To these there belong, for example, a treatment with medications, a nutrition counseling program, or hypnosis. According to the patient's wish

or according to indication, a therapy can take place in small groups or in individual treatment. So that all the therapy providers can access the essential data at arbitrary times, there is provided a network of a number of computers corresponding to the therapy providers.

In order to prevent unauthorized access to the data, the computers or the data network must be suitably safeguarded. The various data providers can also be spatially separated. Thus, for example, a clinic can be located in one place and a practice can be located in another place several kilometers away. For this, for example, ISDN or data teletransmission can be used. The interlinking of the data providers with the aid of an electronic data network makes possible for the first time the cooperation of different therapy providers, and the use of different types of therapy, since otherwise the necessary data cannot be communicated with the necessary speed and security, as well as the necessary precision.

According to a further advantageous mode of execution of the invention, the data regarding the diagnosis, the therapy types, the physical constitution, and the medication are governed, controlled and evaluated over the central computer. In this way the individual therapy providers can be monitored over the central computer. In particular, special types of therapy or medications can be recommended and the therapy results controlled, monitored and compared. The risk of a wrong treatment can therewith be further reduced.

Further advantages and advantageous embodiments of the invention are to be learned from the following specification, the drawing and the claims.

In Fig. 1 there are represented on the left side the tasks worked on and solved by the process and the device, and on the right side various therapy providers. Some of these therapy providers draw up the diagnosis, others cooperate only in the therapy. All the data relating to the diagnosis or the therapy of the patient can be exchanged among

therapy providers on the one hand, and between the central computer and the therapy providers on the other hand. Moreover, the central computer can send recommendations to the therapy providers, or perform an evaluation of the results obtained. It assumes therewith a control function. Furthermore, over the central computer, training and advising of the therapy providers are coordinated and the necessary resources are made available. To the resources there belong, for example, the software for the management of the data.

All the features represented in the specification, in the following claims and in the drawing can be essential to the invention, both individually and also in arbitrary combination with one another.

In the drawing an example of execution of the invention is described in detail in the following:

Fig. 1 Connection of the central computer with the therapy providers.